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2005-2006 GUIDE
to the

MONTANA DEPARTMENT
of **PUBLIC HEALTH**
and **HUMAN SERVICES**

*"Improving and Protecting the Health,
Well-Being and Self-Reliance
of All Montanans."*

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MONTANA DEPARTMENT
of **PUBLIC HEALTH**
and **HUMAN SERVICES**

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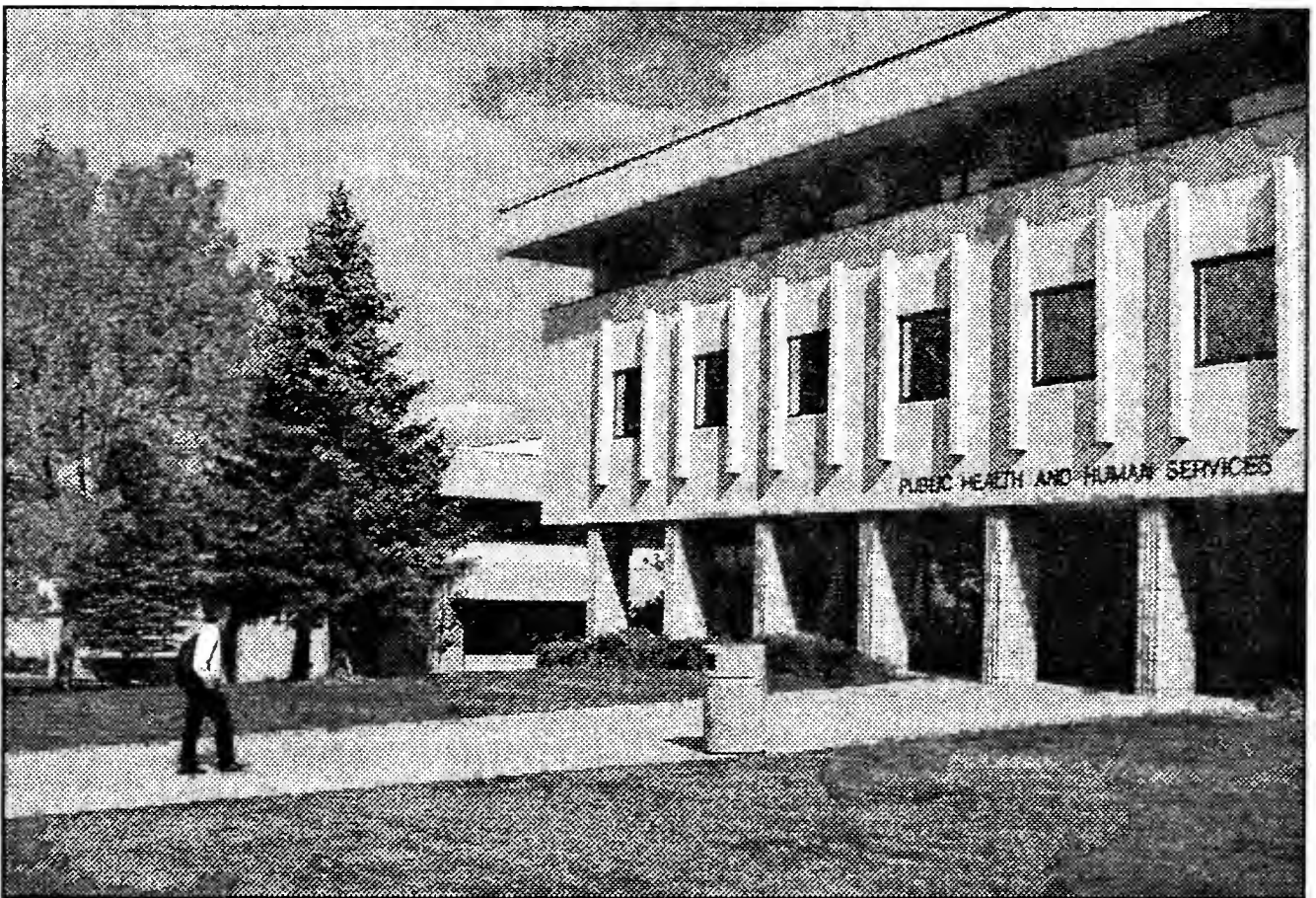
P.O. Box 4210 • 111 North Sanders Street • Helena, MT 59604-4210
406-444-5622 • www.dphhs.mt.gov

ABOUT THE DEPARTMENT

The Montana Department of Public Health and Human Services (DPHHS) was created in 1995, when the Legislature consolidated state social service and health programs from the Departments of Social and Rehabilitation Services, Child and Family Services, Health and Environmental Sciences, and Institutions.

DPHHS is the largest single department in Montana state government, with close to 3,000 employees in Helena and throughout the state. Its total budget for the 2004-2005 biennium is about \$2.4 billion. Of that, about 72 percent comes from federal sources, 23 percent from the state general fund, 4 percent from state special revenue funds, and less than 1 percent from trust funds.

The mission of DPHHS is to improve and protect the health, well being, and self-reliance of all Montanans. More specifically, DPHHS programs seek to achieve the following goals:



The Director's Office for DPHHS is located on the third floor of 111 North Sanders Street in Helena, a block east of the State Capitol. Department employees work at several other locations across the city.

- All children are wanted, safe, and living in healthy families.
- All Montanans are healthy and safe from injury and have access to high-quality health care.
- All Montanans, including the elderly and those with disabilities, have the tools they need to be as self-sufficient as possible.
- All Montanans can contribute to these goals through community giving and service.

These goals are accomplished through the efforts of the director's office and 11 divisions, each of which is featured separately in this guide. A partial list of department programs is included on page 47.



*DPHHS Director
Dr. Robert Wynia*

The director of DPHHS is **Robert E. Wynia, M.D.** He is responsible for overall department policy development, management, and coordination of programs. He directly supervises seven of the department's 11 divisions.

Appointed by Gov. Brian Schweitzer in January 2005, Wynia previously worked as a senior airman medical examiner for the Federal Aviation Administration. He also had a private internal medicine practice in Great Falls. He graduated from the University of Washington medical school and is past president of the Montana Medical Association.

John Chappuis was named deputy director of the department in August 2001. He fills in for the director in his absence and works closely with the divisions of Operations and Technology and Fiscal Services to oversee agency financial matters.

He also is the state Medicaid director and supervises the four divisions that serve Medicaid clients.

Chappuis has administered Medicaid and fiscal programs for the state since 1980.



*Deputy Director
John Chappuis*

Other individuals on the director's staff are:

- **Russ Cater**, chief legal counsel;
- **Carol Seaman**, chief personnel officer;
- **Vicki Turner**, head of the Prevention Resource Center;
- **Gail Briese-Zimmer**, head of the Office of Planning, Coordination, and Analysis; and
- **Gayle Shirley**, public information officer.



Russ Cater



Carol Seaman



Vicki Turner



Gail Briese-Zimmer



Gayle Shirley



Several divisions of DPHHS have their offices in the Cogswell Building, at 1400 Broadway in Helena, just southeast of the Capitol.

DPHHS BY THE NUMBERS

Number of programs	about 350
Number of divisions	11
Total number of employees	2,900
Number of state institutions administered by DPHHS	6
Total biennial budget, 2004-2005	\$2,389,685,865
Percentage of state general fund dedicated to DPHHS	23.16%
Clients getting health insurance coverage through DPHHS	90,056

ADDICTIVE & MENTAL DISORDERS DIVISION



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MISSION

The mission of the Addictive and Mental Disorders Division (AMDD) is to implement and improve appropriate statewide systems of prevention, treatment, care, and rehabilitation for Montanans with mental disorders or drug or alcohol addictions.

SERVICES

The division provides chemical dependency and mental health services by contracting with behavioral health providers throughout Montana. It also provides services through three inpatient facilities—the Montana State Hospital in Warm Springs, Montana Chemical Dependency Center in Butte, and Montana Mental Health Nursing Care Center in Lewistown (see page 43). The Helena office of the AMDD is organized into three bureaus: Chemical Dependency, Mental Health Services, and Operations.

The Chemical Dependency Bureau assesses the need for chemical dependency treatment and prevention services throughout Montana. Those services are available through contracts with 18 state-approved programs. The bureau reimburses for a full range of outpatient and inpatient services, as well as an education program for DUI offenders.

The bureau also organizes and funds activities designed to prevent

the use of alcohol, tobacco, and other drugs by youth and the abuse of those substances by adults. People with substance abuse disorders who have family incomes below 200 percent of the federal poverty level are eligible for public funding of treatment services. In addition, the Medicaid program funds outpatient and residential chemical dependency treatment for adolescents who are Medicaid eligible. The bureau funds services for nearly 1,500 Montanans each month.

The Mental Health Services Bureau is responsible for the development, implementation, operation, oversight, evaluation, and modification of the state's system for delivering and reimbursing publicly funded adult mental health services. The bureau develops, maintains, and revises administrative rules, policies, procedures, and systems necessary to ensure the availability and efficient delivery of appropriate and effective services. The bureau also provides extensive monitoring and oversight of program implementation and operation as well as analysis and reporting of program operations, costs, and outcomes.

Consumers eligible for services include adult Medicaid recipients and other low-income Montanans with severe disabling mental illness. Each month the bureau funds services for about 7,300 individuals.

The Operations Bureau provides information services, program reporting, data management, contract services, procurement, and budget development for the bureau.

BUDGET AND STAFF

The AMDD budget for the 2004-2005 biennium is about \$176.5 million. The division employs about 570 people.



The Addictive and Mental Disorders Division of DPHHS is housed at 555 Fuller Avenue, in downtown Helena.

AMDD BY THE NUMBERS
(FY 2004 figures)

Number of people in chemical dependency treatment	6,449
Number of adults getting mental health treatment through Medicaid	12,920

CHILD & FAMILY SERVICES DIVISION



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Child Abuse Hotline: 1-866-820-KIDS
(1-866-820-5437)

MISSION

The mission of the Child and Family Services Division (CFSD) is to keep Montana's children safe and families strong.

SERVICES

The division provides state and federally mandated protective services to children who are abused, neglected, or abandoned. This includes receiving and investigating reports of child abuse and neglect, working to prevent domestic violence, helping families to stay together or reunite, and finding placements in foster or adoptive homes.

The division operates a toll-free child abuse hotline 24 hours a day, 7 days a week. **Centralized Intake** specialists screen calls, assess the level of risk to children, and prioritize reports of abuse, neglect, and abandonment according to the urgency with which social workers need to respond. The CI specialists then forward reports of suspected child abuse, neglect, or abandonment to social workers in county offices for investigation.

Social workers investigate reports and help parents find solutions to problems that may interfere with their children's safety. If the parents are amenable, the social workers can help the family get in-

home services, such as home management skill training, parenting education classes, modeling skills for parents, and supervised visitations. These can be provided directly by CFSD social workers or by private agencies on contract with the division. Division policy is to provide protective services to children in their own homes when it is possible to do so without risking their safety.

To help family members become involved in addressing the care and safety of their children, the division uses **Family Group Decision-making Meetings**. These meetings bring together family, friends, social workers, and service providers to share concerns, knowledge, and skills. They can be used throughout the child protective process—as a way to prevent removal of a child from the home, after the child is in foster care, to document family progress in improving the home setting, and to help identify permanent placements for a child.

If a social worker determines that a child is in immediate danger, the child may be placed outside the home, either permanently or temporarily. District court judges must approve all **out-of-home placements**.

Kinship care involves placing the child, whenever possible, with an extended family member, clan member, or tribal member. It provides the child with a safe and nurturing environment while preserving a family connection. When an out-of-home placement is necessary, social workers are required to first try to place the child with a non-custodial birth parent or with a member of the child's extended family.

Under the federal **Indian Child Welfare Act**, CFSD must do its best to place Indian children in settings that encourage connections with their tribal heritage. The act also requires that the child's tribe and parents get notice of all judicial proceedings.

CFSD family resource specialists recruit and license foster parents to provide substitute homes for children placed away from their parents or guardians. **Foster care** includes family foster care, group homes, shelter care, and residential facilities.

CFSD also licenses specialized and therapeutic family foster homes for children with special needs and child placement agencies, such as adoption agencies.

Ideally, the division tries to help improve parents' abilities to care for their children so that children who have been removed from their homes can return as soon as possible. **Reunification services** include Family Group Decision-making Meetings, counseling, parenting education classes, in-home services, mentoring, respite care, supervised visits, and transportation.

If a court determines that a child cannot be returned to birth or legal parents, a permanency team reviews the child's circumstances and identifies whether adoption, guardianship, placement with a relative, or another living arrangement is the best option.

Adoption is generally the permanency plan of choice when a court terminates parental rights, because adoption offers a child a lifetime link to a family. CFSD administers a subsidized adoption program for children with special needs.

Guardianship is an alternative when adoption is not considered to be the best option. Guardianship is a legal relationship that can only be established or dissolved by a court.

For children ages 16 to 21 who are making the transition from foster care to **independent living**, CFSD offers a number of services, including housing assistance, counseling, career guidance, education, transportation, money management skills, and financial stipends.

BUDGET AND STAFF

The CFSD budget for the 2004-2005 biennium is about \$98.6 million. The division gets about 56 percent of its budget from federal sources, 40 percent from the state general fund, and 4 percent from state special revenue funds.

The work of the division is accomplished by a staff of about 340 people. Thirty work out of three bureaus in the central office in Helena: Operations and Fiscal, Program, and Training. Field staff

work in 41 communities across the state under the direction of five regional administrators located in Billings, Great Falls, Helena, Miles City, and Missoula. Seventeen people staff the child abuse hotline.

CFSD BY THE NUMBERS

(FY 2004 figures)

Children receiving services from CFSD (monthly average)	5,000+
Abuse/neglect reports	14,533
Abuse/neglect investigations	7,278
Children entering state care	1,383
Children leaving state care	1,194
Children in foster care (as of 6-30-04)	1,980
Adoptions finalized	158
Families served by in-home programs	1,437
Extended families used for kinship placement	489

Figures indicate totals for state fiscal year 2004 unless otherwise indicated.

CHILD SUPPORT ENFORCEMENT DIVISION



Lonnie J. Olson

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MISSION

The mission of the Child Support Enforcement Division (CSED) is to diligently pursue and ultimately achieve financial and medical support of children by establishing, enforcing, and increasing public awareness of parental obligations.

SERVICES

The division provides federally mandated child support enforcement services. These include:

- Locating absent parents;
- Establishing paternity;
- Establishing financial and medical support orders;
- Enforcing current and past-due child support;
- Offering medical and spousal support; and
- Modifying child support orders.

Administrative decisions of the division can be appealed through judicial review by a district court.

Individuals who receive public assistance under the Temporary Assistance to Needy Families (TANF) program are automatically referred to CSED. Support owed to the family is automatically

assigned to the state as a condition of TANF. When the child support is collected, it is used to reimburse the state and federal governments for welfare benefits paid to the family.

Individuals who do not receive public assistance may apply for division services. In non-TANF cases, child support collections are forwarded to the custodial party. Other states refer cases to Montana for action when a non-custodial parent lives in Montana.

CSED also collects parental contributions to the state for foster care placements.

Regular child support collections help TANF families make the transition from welfare dependency to self-sufficiency and help non-TANF families maintain their economic self-sufficiency. Requiring obligated parents to provide medical support coverage for their children saves Medicaid dollars and ensures that children have access to medical care.

In May 2003, CSED implemented the Montana Access Card (MAC) for child support payments. The department deposits payments to each recipient's electronic benefit transfer debit card. Recipients can then use the card at various points of sale and ATM machines statewide to access their payments.

BUDGET AND STAFF

The budget for CSED in the 2004-2005 biennium is about \$19.8 million. The federal government reimburses the division for 90 percent of the costs associated with genetic testing for paternity and 66 percent of all other administrative expenses. The remainder of CSED funding comes from the state special revenue fund and a small amount from the state general fund.

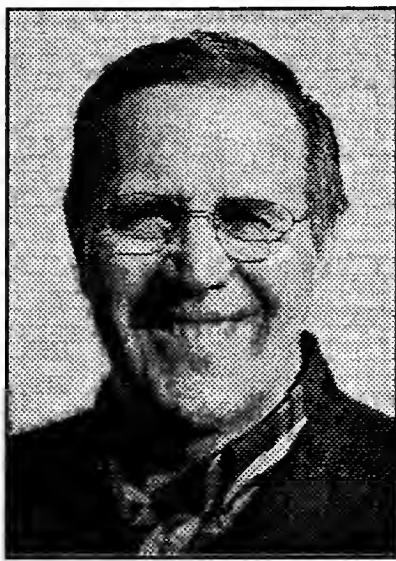
The division's work is accomplished by about 168 staff members in six bureaus: Administrative Services, Field Services, Program and Training, Legal Services, Budget, and the Office of the Administrative Law Judge (OALJ). Central program administration, the OALJ, and the Interstate Regional Office are located in Helena. Four additional regional offices are located in Butte, Billings, Great Falls, and Missoula.

CSED BY THE NUMBERS

(FY 2004 figures)

Child support collected	\$54,322,737
Paternities established	1,217
Child support orders established	1,831
Payments processed	282,000
Medicaid dollars saved (by enforcing parental obligations to provide medical coverage)	\$2.4 million
Total number of cases (as of 9-30-04)	40,983

DISABILITY SERVICES DIVISION



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MISSION

The mission of the Disability Services Division (DSD) is to provide services that assist Montanans with disabilities to live, work, and participate in their communities.

SERVICES

DSD provides or contracts to provide a wide variety of services for Montanans of all ages who have physical, mental, or developmental disabilities. This includes those who are blind, visually impaired, deaf, or hard of hearing, as well as those who have suffered traumatic brain injuries.

Services are provided through four primary programs: Vocational Rehabilitation, Developmental Disability, Disability Determination, and Montana Telecommunications Access. The division also administers the Montana Developmental Center in Boulder (see page 43).

Among the services DSD provides are institutional care, residential services, community support, home-based services for families, case management, and telephone relay service and equipment.

The **Developmental Disabilities Program** provides care and support to individuals of all ages who have developmental disabilities and their families. The focus of the program is to tailor care to the individual and provide it in a natural environment.

Through its **Vocational Rehabilitation Program**, DSD provides a wide variety of employment-related services, such as:

- Career counseling;
- Career training;
- Transportation;
- Adaptive equipment;
- Orientation and mobility services to the blind;
- Rehabilitation teaching services to the blind;
- Independent living services;
- Medical services;
- Job placement services; and
- Supported employment.

The **Disability Determination Program** of DSD is responsible for medical adjudication of all claims for Social Security Disability and Supplemental Security Income. The program is ranked in the top 10 percent of such programs nationally for accuracy and number of claims processed.

The **Telecommunications Access Program** makes communication by telephone simple, dependable, and convenient for people who have difficulty using a standard phone. It enables standard telephone users to communicate with people who are deaf, hard of hearing, or speech disabled through the use of text telephones or other assistive telephone devices.

Numerous constituent groups from across the state help the division plan and establish programs and budget priorities. These include the Montana Council on Developmental Disabilities, Family Support Advisory Council, Montana Advocacy Program, Montana Association of Independent Disability Services, Montana Association for Rehabilitation, Montana Vocational Rehabilitation Council, and Montana State Independent Living Council.

BUDGET AND STAFF

The budget for DSD in the 2004-2005 biennium is about \$261 million. Funding for DSD is a complex mixture of federal and state funds. The Disability Determination Program is totally funded by the federal government. The Montana Developmental Center is funded through the state general fund but is reimbursed by Medicaid for some services. The Vocational Rehabilitation Program receives about 79 percent of its funding from the federal government and 21 percent from the state, while the Developmental Disabilities Program gets 60 percent of its funding from the federal government and the remaining 40 percent from the state. The Montana Telecommunications Access Program is financed through the state special revenue fund.

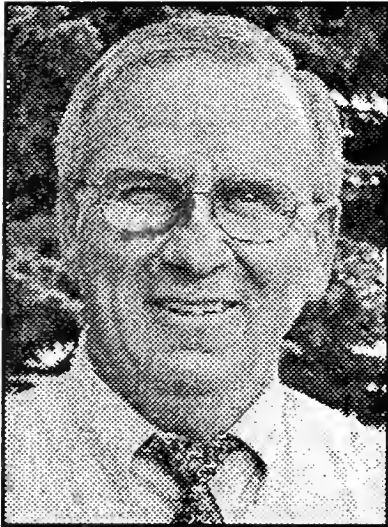
The division has a staff of about 540 people, about 325 of whom work at the Montana Developmental Center. The Developmental Disabilities Bureau has offices in Billings, Bozeman, Butte, Great Falls, Helena, Kalispell, Miles City, and Missoula. In addition to these cities, the Vocational Rehabilitation Program has offices in Havre and Warm Springs, and the Developmental Disabilities Bureau has an office in Glasgow.

DSD BY THE NUMBERS

(FY 2004 figures)

Individuals receiving DD services (as of 9-30-04)	3,961
Individuals on waiting list to receive DD services	457
Individuals employed with help of Vocational Rehabilitation Program	932
Telecommunications access services provided	6,172

FISCAL SERVICES DIVISION



Mick Robinson

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MISSION

The mission of the Fiscal Services Division (FSD) is to provide professional services in operational areas critical to the efficient and effective management of the department.

SERVICES

FSD provides support services for the department, including financial and accounting oversight, cash management, preparation and filing of federal financial reports, purchasing supplies and equipment, payroll processing, and audit coordination. FSD also provides leadership and guidance in the development and implementation of accounting policies and procedures and best business practices.

BUDGET AND STAFF

The budget for the division for the 2004-2005 biennium is about \$11 million. About 48 percent is from federal sources, 46 percent from the state general fund, and 6 percent from state special revenue funds.

The work of the division is accomplished by about 55 full-time state employees.

HEALTH RESOURCES DIVISION



Chuck Hunter

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Medicaid Help Line: 1-800-362-8312

MISSION

The role of the Health Resources Division (HRD) is to provide health care for low-income and disabled Montanans through Medicaid, the Children's Health Insurance Plan (CHIP), and the Children's Special Health Services.

SERVICES

The division provides administration, policy development, and reimbursement for the primary and acute care portions of the Medicaid program. It also provides children's mental health services, health insurance coverage for children through CHIP, and specialized health services for children with special health-care needs.

Medicaid services include:

- Primary care and PASSPORT to Health managed-care services;
- Inpatient and outpatient hospital services;
- Prescription drug services;
- Early and periodic screening, diagnosis, and treatment for children;
- Transportation;

- Indian health services;
- Durable medical equipment; and
- Dental services.

The Acute Services Bureau manages the Medicaid programs for home infusion therapy, dental services, durable medical equipment, school-based services, eyeglasses, audiology, therapies, prescription drugs, and transportation.

The Children's Mental Health Bureau is responsible for planning, operating, coordinating, and ensuring quality in the state's publicly funded mental health services for children and adolescents.

The Health Resources Bureau is responsible for maintaining health care service-delivery systems for the Children's Health Insurance Plan (CHIP) and Children's Special Health Services (CSHS).

The Hospital and Clinical Services Bureau manages the Medicaid inpatient and outpatient hospital services, Indian health services, end-stage renal disease services, ambulatory surgical centers, freestanding dialysis clinics, federally qualified health centers, rural health clinics, and critical access hospitals.

The Managed Care Bureau manages the Medicaid programs for physician-related services, including claims management and resolution, provided by physicians, mid-level practitioners, podiatrists, laboratories, chiropractors, respiratory therapists, and nutritionists. The Montana Medicaid managed-care program is known as PASSPORT to Health.

In 2004, the bureau implemented a new program known as Nurse First. It provides assistance to Medicaid recipients with chronic conditions, such as diabetes, asthma, and heart conditions. Through a telephone hotline, it also helps all Medicaid clients make appropriate decisions about the level of medical care they need in any given situation.

The Fiscal Bureau projects and monitors division expenditures, monitors contracts, and provides financial reporting services.

BUDGET AND STAFF

The budget for the division for the 2004-2005 biennium is about \$823.5 million. About 77 percent is from federal sources, 19 percent from the state general fund, and 4 percent from state special revenue funds (primarily from tobacco settlement payments and interest on those payments). Most of the programs administered by the division are funded using matching formulas: the state provides some funds and these are matched at various rates by the federal government.

The division is staffed by about 60 FTEs, most of which are located in Helena. The division does have some field staff.

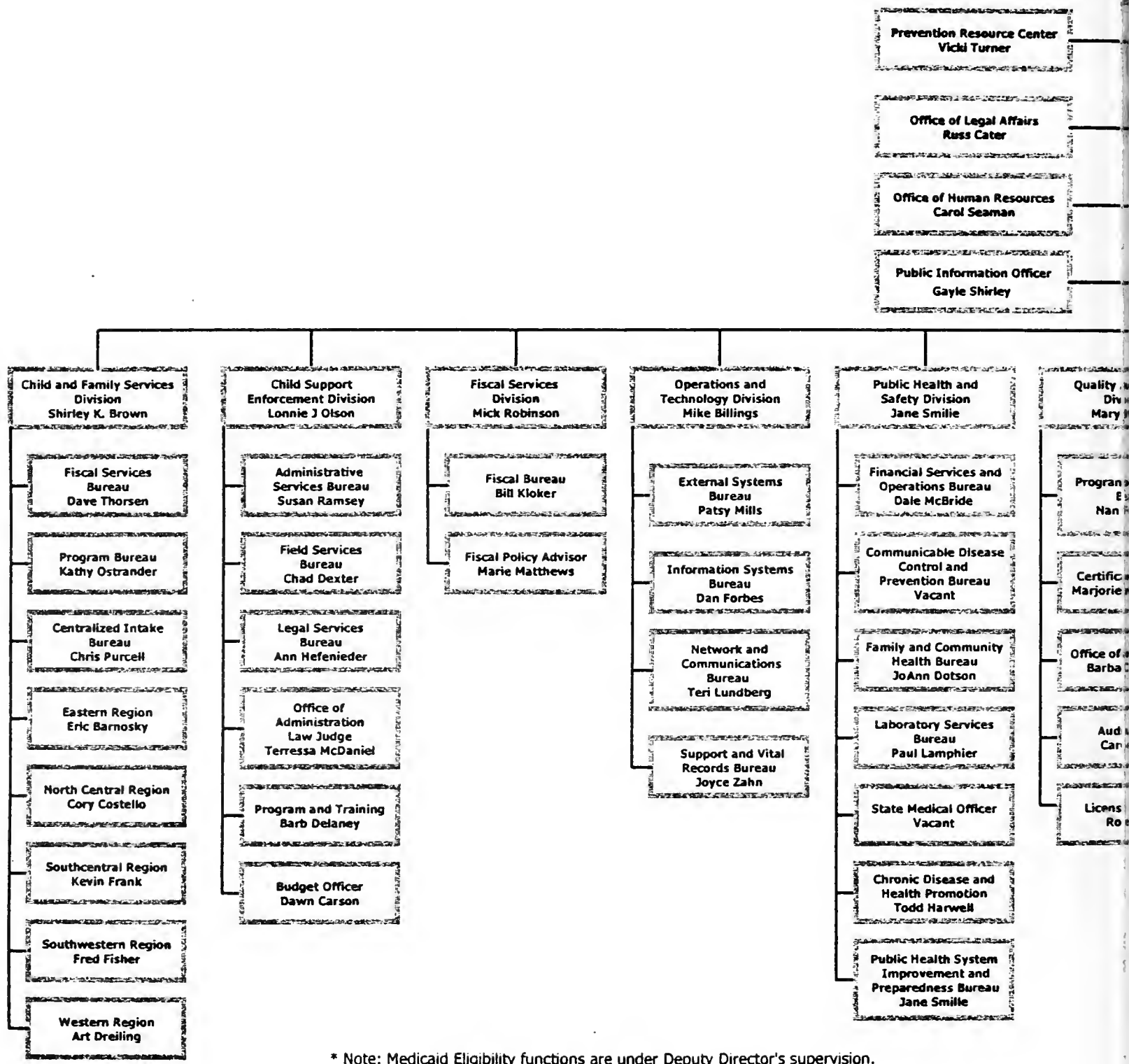
HRD BY THE NUMBERS

(FY 2004 figures)

Percentage of total DPHHS budget expended on Medicaid program	54%
Montanans covered by Medicaid at some point in FY 2004	117,773
Adults on Medicaid (monthly average)	34,766
Children on Medicaid (monthly average)	53,952
Elderly on Medicaid (monthly average)	6,911
Native Americans on Medicaid (monthly average)	26,204
CHIP membership (monthly average)	10,368

Figures indicate totals for state fiscal year 2004 unless otherwise indicated.

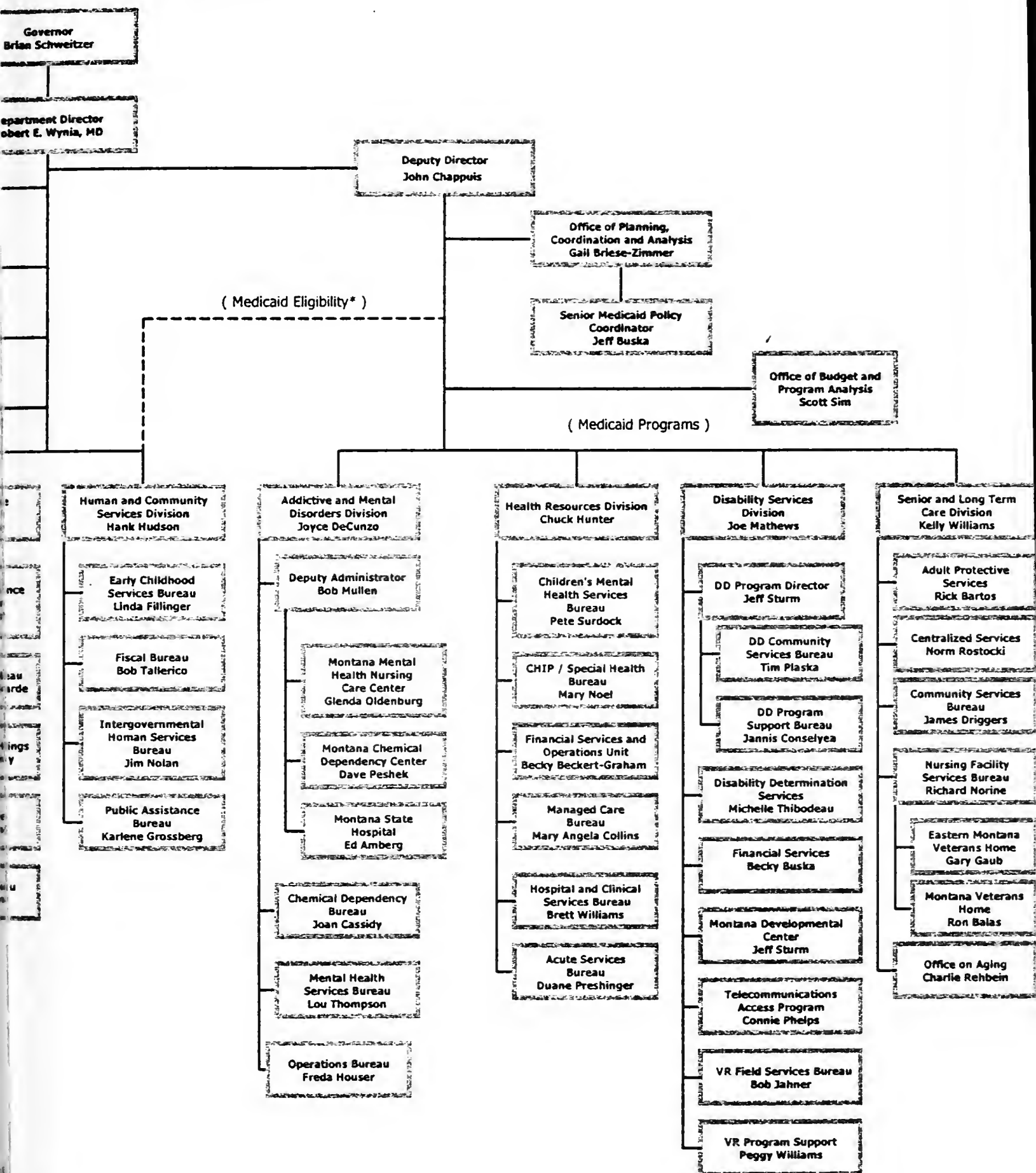
Department of Public Health
Organizational Chart



* Note: Medicaid Eligibility functions are under Deputy Director's supervision.

Health and Human Services

Organizational Chart by Bureau



HUMAN & COMMUNITY SERVICES DIVISION



Hank Hudson

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MISSION

The mission of the Human and Community Services Division (HCSD) is to support the strengths of families and communities by promoting employment and providing the assistance necessary to help families and individuals meet basic needs and work their way out of poverty.

SERVICES

The division provides cash assistance, employment training, food stamps, Medicaid, child care, meal reimbursement, nutrition training, energy assistance, weatherization, abstinence education, and other services to help families move out of poverty and toward self-support.

Cash assistance is funded by a federal block grant called **Temporary Assistance for Needy Families (TANF)**. The program provides monthly payments to low-income families and children who meet income and resource eligibility standards. The **Work Readiness Component (WoRC)** provides employment and training services to individuals receiving cash assistance.

The **Food Stamp Program** provides benefits to eligible families to supplement their food budget and increase their ability to purchase

healthy foods. A **Food Stamp Nutrition Education Program**, operated jointly with Montana State University, teaches participants to use their food stamp benefits wisely.

The division determines eligibility for more than 38 **Medicaid** programs for children, pregnant women, the elderly, the disabled, and other eligible adults.

Through its **child-care programs**, HCSD helps low-income working and TANF families pay for child care so they can work or take advantage of training and educational opportunities that prepare them for work. It also helps child-care providers improve their quality of care by providing training incentives, mentoring, and grant programs.

The **Child and Adult Care Food Program** (CACFP) provides nutrition education and reimburses for meals served to children in child-care centers, family and group child-care homes, emergency shelters, and after-school and outside-school-hour facilities, as well as to adults in adult day-care facilities.

The **Head Start State Collaboration** project provides a vital link between Head Start and state programs to help build early childhood systems and access to comprehensive services and support for all low-income children.

The **Low Income Energy Assistance Program** (LIEAP) provides heating assistance to low-income people, while the **Weatherization Program** pays them for materials to weatherize their homes.

Through its **Commodities Distribution Program**, HCSD delivers nutritional foods to Montana's Indian reservations, food banks, emergency-feeding organizations, and senior centers. It also provides monthly food packages to low-income women, children, and seniors.

The division administers a federal **Community Services Block Grant** to fund local projects aimed at addressing the causes of poverty, as well as a **Homeless Grant** to help local shelters and Human Resource Development Councils provide lodging for

individuals and families who are without, or at risk of being without, housing.

The **Montana Abstinence Partnership** provides education and local program support to encourage sexual abstinence outside of marriage.

BUDGET AND STAFF

About 89 percent of the HCSD budget is funded by the federal government. The remainder is from the state general fund. The total budget for the 2004-2005 biennium is about \$382.2 million.

The work of the division is accomplished by about 450 employees working in four bureaus: Early Childhood Services, Public Assistance, Intergovernmental Human Services, and Fiscal. About 10 percent of the staff is in Helena. The remainder work in field offices in each of Montana's 56 counties. There are 12 resource and referral agencies across the state.

Contracted services are provided by Human Resource Development Councils, Job Service Workforce Centers, and a variety of nonprofit organizations.

HCSD BY THE NUMBERS

(FY 2004 figures)

Average number of TANF cases per month	5,427
Average number of WoRC recipients per month	2,842
Average number of food stamp cases per month	32,544
Average number of Medicaid recipients per month	71,774
Meals served by Child & Adult Care Food Program	8,457,786
Low-income working families assisted with child care	5,689
Low-income homes weatherized	1,638
Households getting energy assistance	19,125
Food distributed through Food Commodity Program	9 million pounds

Figures indicate totals for state fiscal year 2004 unless otherwise indicated.

OPERATIONS & TECHNOLOGY DIVISION



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MISSION

The mission of the Operations and Technology Division (OTD) is to provide state-of-the-art support in operational and technological areas critical to the efficient and effective implementation of department programs.

SERVICES

OTD provides support services for the department, including consultation on planning and managing the executive budget and cost projections for large-scale benefit programs such as Medicaid and Temporary Assistance to Needy Families (TANF). The division is also responsible for agency-wide process reengineering efforts critical to the department mission, development and operation of internal computer systems, technical planning of electronic government applications, telecommunications, security, lease management, mail handling, and management of vital records and statistics.

Among the many complex computer systems managed by the division are:

- **EBT**, an electronic benefit transfer system for issuing food stamps that has eliminated the need for paper coupons. Instead participants use a card similar to a bank debit card.
- **SEARCHS**, a system for the enforcement and recovery of child support that automates financial management of child support collections, absent parent location, and paternity establishment.
- **TEAMS**, the economic assistance management systems, which provide statewide, online eligibility determination for food stamps, TANF, and Medicaid.

BUDGET AND STAFF

The budget for OTD in the 2004-2005 biennium is about \$54.7 million. About 62 percent of the division's funding comes from federal sources, 34 percent from the state general fund, and 4 percent from state special revenue funds.

The work of the division is accomplished by about 80 full-time state employees and about 110 contract employees.

OTD BY THE NUMBERS

(FY 2004 figures)

Birth/death certificates issued online	75,290
Medicaid claims processed	6,667,205
Computers supported	3,100

PUBLIC HEALTH & SAFETY DIVISION



Jane Smilie

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MISSION

The mission of the Public Health and Safety Division (PHSD) is to improve and protect the health and safety of Montanans.

SERVICES

The division provides a wide range of services aimed at promoting healthy behavior, preparing for public health emergencies, and monitoring the spread of infectious diseases. It operates two laboratories, one focusing on environmental health and the other on public health, including testing of newborn children.

Services are offered through a variety of private and public providers, including local and tribal health departments, clinics, and hospitals. The division contracts with more than 700 private nonprofit providers for the delivery of public health services.

The Family and Community Health Bureau oversees programs aimed primarily at children, women, and families. These include maternal and child health, family planning, nutrition education, and supplemental food distribution for women, infants, and children. The latter two services are provided through the Supplemental Nutrition for Women, Infants, and Children program (WIC).

The Communicable Disease Control and Prevention Bureau administers programs related to detection, control, and prevention of communicable, or infectious, diseases. These programs include immunizations, prevention and treatment of sexually transmitted diseases, food and consumer safety, and epidemiology.

The Chronic Disease Prevention and Health Promotion Bureau manages comprehensive planning and prevention efforts related to cancer, heart disease, diabetes, obesity, and traumatic injury. The bureau also licenses ground and air ambulance services and oversees the Montana Tobacco Use Prevention Program.

The Public Health System Improvement and Preparedness Bureau works across the division and in partnership with local and tribal health departments and others to improve the availability and effectiveness of training and educational opportunities for public health workers. This is accomplished in part through distance learning and the Public Health Training Institute. The bureau also is responsible for preparing the public health workforce and citizens of Montana to cope with public health emergencies.

The Laboratory Services Bureau operates two laboratories and is financed primarily through fees charged for lab services. The **Clinical Public Health Laboratory** performs diagnostic testing in support of the department's communicable disease control programs, as well as screening of newborn children for inborn errors of metabolism. The lab also provides reference microbiological services to Montana hospital and clinical labs.

The **Environmental Laboratory** tests drinking water and analyzes other environmental samples, such as soil and air. Its staff also inspects and certifies private industry labs in Montana that perform drinking water analysis.

BUDGET AND STAFF

The division budget for the 2004-2005 biennium is about \$98 million. Funding is a complex mix of federal and state revenues and fees, with about 96 percent coming from federal grants and contracts and 4 percent from state funds. The division employs about 165 people.

PHSD BY THE NUMBERS

(FY 2004 figures)

Percentage of toddlers visiting health-care provider offices who were adequately immunized	90.9%
Laboratory tests performed	175,007
Newborn screening tests performed	67,245
Cases of foodborne illness identified	449
Toothbrushes distributed free to children	62,208
Calls to Tobacco Quit Line (monthly average)	381
Public accommodations licensed	about 3,000
Participants in WIC program	21,071
Unintended pregnancies prevented through direct services and education efforts	18,840
Smoke alarms installed free in households	5,035
Public health workers trained	1,260
Women screened for breast and cervical cancer	3,265

Figures indicate totals for state fiscal year 2004 unless otherwise indicated.

QUALITY ASSURANCE DIVISION



Mary Dalton

Administrator: Mary Dalton
Address: 2401 Colonial Drive
P.O. Box 202953
Helena, MT 59620-2953
Telephone: 406-444-2037
Fax: 406-444-3980
E-mail: mdalton@mt.gov

MISSION

The role of the Quality Assurance Division (QAD) is to protect the safety and well being of Montanans by monitoring and ensuring the integrity and cost-effectiveness of department programs.

SERVICES

The division fulfills its role by:

- Licensing and/or certifying health care, day care, and residential services;
- Detecting and investigating abusive or fraudulent practices within the Medicaid and food stamp programs and initiating recovery efforts;
- Reducing Medicaid costs by identifying other insurers or parties responsible for paying a beneficiary's medical expenses;
- Providing internal and independent audits for DPHHS programs;
- Providing independent fair hearings for clients and providers participating in DPHHS programs;
- Monitoring and evaluating health maintenance organizations for quality assurance and network adequacy;
- Maintaining a certified nurse aide registry;
- Approving and monitoring nurse aide training programs;

- Operating the Certificate of Need program; and
- Ensuring department compliance with the federal Health Information Portability and Accountability Act (HIPAA).

BUDGET AND STAFF

The division budget for the 2004-2005 biennium is about \$15.6 million. A combination of 11 different federal sources provides about 68 percent of QAD funding; the state provides the remaining 32 percent.

The division employs about 110 people, 30 of whom are scattered among field offices in Anaconda, Billings, Bozeman, Butte, Great Falls, Havre, Hinsdale, Kalispell, Livingston, Miles City, and Missoula.

QAD BY THE NUMBERS

(FY 2004 figures)

Medicaid dollars saved by identifying other insurance resources	\$86 million
Money recovered from people who transferred assets to qualify for Medicaid	\$2.7 million
Money recovered in overpayments to public assistance clients	\$791,000
Health-care, residential, community residential and day-care facilities licensed	2,234
Facilities certified for Medicaid and Medicare participation	397

SENIOR & LONG TERM CARE DIVISION



Kelly Williams

Administrator: Kelly Williams
Address: 111 North Sanders Street
P.O. Box 4210
Helena, MT 59604-4210
Telephone: 406-444-4077
Fax: 406-444-7743
E-mail: kewilliams@mt.gov

Aging Services Hotline: 1-800-551-3191

MISSION

The mission of the Senior and Long Term Care Division (SLTC) is to advocate and promote dignity and independence for older Montanans and Montanans with disabilities by:

- Providing information, education, and assistance;
- Planning, developing, and providing for quality long-term care services; and
- Operating within a cost-effective service delivery system.

SERVICES

The division administers aging services, adult protective services, and the state's two veterans' homes (see page 46). It also helps to fund care for elderly and disabled Montanans who are eligible for Medicaid and Supplemental Security Income (SSI).

The Office on Aging develops a state plan on aging and approves service delivery plans and programs developed by 10 Area Agencies on Aging located across Montana. Among the services provided by the area agencies are senior centers, Meals on Wheels, health services, transportation, home chore services, and information, referral, and assistance services. The Office on Aging houses the Long-term Care Ombudsman, Elderly Legal Assistance, State

Health Insurance, and Information, Assistance and Referral programs.

The Long-term Care Ombudsman is an advocate for all residents of long-term care facilities, especially nursing homes and personal care homes. The ombudsman can provide information or direct assistance related to the health, safety, and rights of residents.

The Elderly Legal Assistance Program provides training for seniors, family members, and others on elder-specific laws. The program develops pro-bono and local legal service referrals, training materials, and telephone assistance to seniors who have legal questions.

The State Health Insurance Program is a statewide source of program information for beneficiaries of Medicare, Medicaid, Medicare supplemental policies, long-term care insurance, and other health insurance benefits.

The Information, Assistance and Referral Program is a service designed to link Montana seniors, their family members, and caregivers with needed services. Eighty-two technicians work through the local Area Agencies on Aging to provide information about services, make proper referrals, and do public education and outreach within their communities.

The Adult Protective Services Program employs 36 social workers across the state whose duties include investigating allegations of abuse, neglect, and exploitation of the elderly and people with disabilities. They also arrange for and coordinate a variety of support services aimed at protecting vulnerable people from abuse and neglect.

The Medicaid Community Services Program pays for personal care, skilled nursing care, home health aides, home dialysis attendants, and hospice care for elderly and disabled people eligible for Medicaid.

The Home and Community Based Services Program contracts with case managers in local communities to arrange for an array of

in-home services to enable people in need of care to avoid a stay in a hospital or long-term care facility.

The Medicaid Nursing Facility Services Program pays for short- and long-term nursing care for individuals eligible for Medicaid. Sixty percent of nursing care beds in Montana are funded through Medicaid.

The State Supplemental Payments Program supplements the Social Security Supplemental Security Income (SSI) of eligible individuals who live in designated residential care facilities. These facilities include community homes for individuals with developmental or mental disabilities, group homes for individuals with severe disabilities, personal care homes, licensed foster homes, and transitional living homes.

BUDGET AND STAFF

The division budget for the 2004-2005 biennium is about \$428.4 million. The largest source of SLTC funding is the federal Medicaid program. The federal government pays about 72 percent of Medicaid expenditures, while the state pays the remaining 28 percent in matching funds. Other federal funding includes grants under the Older Americans Act and money to supplement nursing home care from the Department of Veterans Affairs. The Montana Veterans Home is funded in part with money from the state cigarette tax.

The division employs about 190 people, including staff at the two veterans homes.

SLTC BY THE NUMBERS

Montanans over age 65 (in 2000)	13.4%
Montanans expected to be over age 65 by 2025	24.5%
Montana veterans over age 65	33%
Medicaid nursing home expenditures (FY2003)	\$122.3 million
Decline in nursing home occupancy in Montana in past 8 years	15%
Increase in licensed assisted-living beds in Montana since 1992	25%
People served by personal care attendant program (FY2002)	about 3,000

DIRECTORY OF DEPARTMENT INSTITUTIONS

The department oversees administration of six institutions located across the state. They are the Montana Chemical Dependency Center in Butte, Montana Developmental Center in Boulder, Montana Mental Health Nursing Care Center in Lewistown, Montana State Hospital in Warm Springs, Montana Veterans Home in Columbia Falls, and Eastern Montana Veterans Home in Glendive.

MONTANA CHEMICAL DEPENDENCY CENTER

2500 Continental Drive
Butte, MT 59701
406-496-5400

MCDC is the only in-patient chemical dependency treatment facility administered by the state. It serves individuals 18 or older who have been diagnosed as having an addiction to drugs or alcohol or who suffer from both addiction and mental disorders. It provides detoxification and a full range of medically monitored treatments.

Patients are screened and referred for this level of care by licensed addiction counselors from state-approved, community-based outpatient and in-patient providers, private practitioners, and Indian reservation programs.

MCDC is funded with alcohol tax dollars. The facility provides around-the-clock care to about 700 patients a year with a staff of about 41 FTEs. The administrator is Dave Peshek, dpeshek@mt.gov.

MONTANA DEVELOPMENTAL CENTER

310 Fourth Avenue
P.O. Box 87
Boulder, MT 59632
406-225-4472

MDC is the only licensed intermediate-care facility in the state for individuals with mental retardation and/or developmental disabilities. The center provides a full array of services, including behavioral treatment, life skills, medical and psychological services, and habilitation services. MDC is licensed to serve 110 people; the current population is about 95.

Individuals must be committed to MDC by either civil or criminal courts. Commitments are governed by procedures established in state law and are based on a number of factors, including:

- Being a danger to oneself or others;
- Medical or behavioral problems so severe that community programs are inadequate; and
- Commission of a serious crime.

The center is funded from the state general fund and then is reimbursed by Medicaid for about 70 percent of the cost of most services. Medicaid does not reimburse for criminal commitments.

MDC employs about 325 people. The superintendent is Jeff Sturm, jesturm@mt.gov.

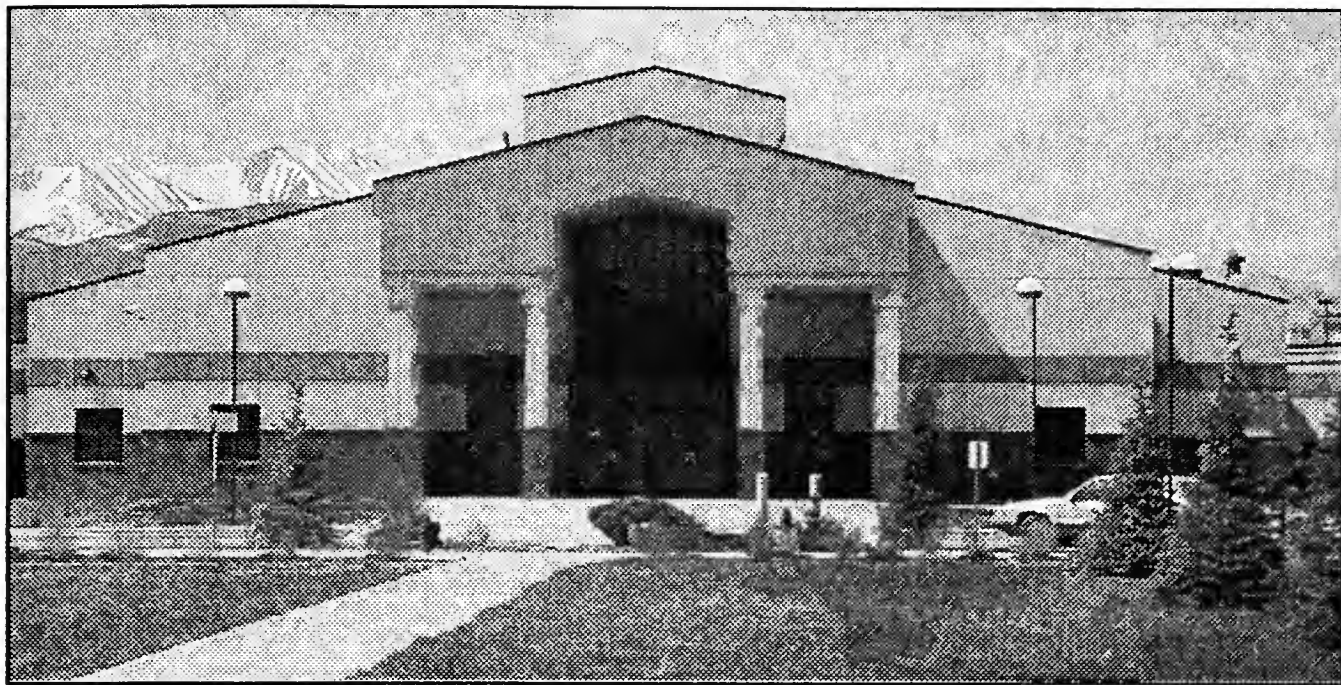
MONTANA MENTAL HEALTH NURSING CARE CENTER

800 Casino Creek Road
Lewistown, MT 59457
406-538-7451

The Nursing Care Center provides nursing care to people who have mental disorders. There were 24 new admissions during fiscal year 2004. The average age of residents is 69.

The center has four units: Dementia/Alzheimer's, heavy care, intermediate care, and a locked unit for residents considered at risk of walking away.

The center employs 122 people. The superintendent is Glenda Oldenburg, goldenbourg@mt.gov.



Montana State Hospital was first established by the Territorial Legislature in 1877. The current facility was constructed in 2000.

MONTANA STATE HOSPITAL

300 Garnet Way

Warm Springs, MT 59756

406-693-7000

Montana State Hospital is the only publicly operated inpatient psychiatric hospital in the state. It provides treatment to adults who have serious mental illnesses and who are referred from hospitals, mental health programs, and district courts from communities across the state. All admissions are governed by procedures established in state law.

The hospital maintains 174 hospital beds licensed and certified by the U.S. Centers for Medicaid and Medicare Services (CMS), as well as 15 transitional care (group home) beds. A 20-bed unit that is not licensed was opened in September 2003 to help ease overcrowding. The hospital serves an average of 190 patients at a time.

A total of 581 admissions were recorded in fiscal year 2004, an increase of 18 percent over 2003 admissions. Many other state hospitals across the country have reported an increasing demand for services. The hospital has about 360 FTEs. The administrator is Ed Amberg, eamberg@mt.gov.

MONTANA VETERANS HOME

P.O. Box 250

Columbia Falls, MT 59912-0250

406-892-3256

The department provides skilled nursing care and related services to Montana veterans in two facilities: the Montana Veterans Home in Columbia Falls and Eastern Montana Veterans Home in Glendive.

The veterans' home in Columbia Falls has 90 beds for people needing intermediate/skilled care and 15 beds for patients suffering from Alzheimer's or dementia. The home also has a 12-bed live-in personal-care facility approved by the U.S. Department of Veterans' Affairs. The home is certified by Medicaid and Medicare.

Staff of the Senior and Long Term Care Division operate the home. Ron Balas, rbalas@mt.gov, is the superintendent.

EASTERN MONTANA VETERANS HOME

2000 Montana Avenue

Glendive, MT 59330

406-345-8855

The department contracts with a private provider to operate the Glendive veterans home. The facility has 80 beds. Gary Gaub, emvh@midrivers.com, is the department's representative at the home.

DIRECTORY OF DEPARTMENT PROGRAMS

The following is a list of some of the approximately 350 programs within DPHHS. For general information, call 406-444-5622 or (TDD) 406-444-2590. You can visit the department's Web site at www.dphhs.mt.gov.

Abstinence	406-444-3008
Adoption	406-444-5900
Adult Protective Services	406-444-9810
Aging Services	406-444-7788
AIDS/STD Hotline	800-233-6668
Asbestos Screening & Surveillance	406-293-5060
Blind & Low Vision Services	406-444-4183 or 877-296-1197
Breast & Cervical Health	406-444-5442
Cancer Tumor Registry	406-444-6786
Cardiovascular Health	406-444-6677
Chemical Dependency	406-444-3964
Child Abuse Hotline	866-820-5437
Child Care	406-444-0309
Child Support Enforcement	406-444-9855
Children's Health Insurance Plan	406-444-6971 or 877-543-7669
Children's Mental Health	406-444-3964
Children's Special Health	406-444-6971 or 800-762-9891
Chronic Disease Prevention	406-444-1437
Commodities Distribution	406-447-4262
Communicable Disease Control	406-444-0272
Day Care Licensing	406-444-7770
Developmental Disabilities Services	406-444-2995
Diabetes Prevention	406-444-6677
Disability Determination	406-444-3054
Distance Learning	406-444-6820
Elder Abuse Hotline	800-551-3191

Elderly Legal Assistance	406-444-7783
Emergency Medical Services	406-444-4460
Emergency Preparedness	406-444-4016
Environmental Laboratory	406-444-2642
Environmental Public Health Tracking	406-444-4871
Epidemiology	406-444-0273
Family Planning	406-444-3609
Food & Consumer Safety	406-444-2408
Food/Commodity Distribution	406-447-4262
Food Stamps	406-444-1788 or 800-332-2272
Foster Care	406-444-5900
Health Facility Licensing	406-444-2676
Immunizations	406-444-5580
Indian Child Welfare	406-444-9748
Injury Prevention	406-444-4126
Long-term Care Ombudsman	406-444-7785
Low Income Energy Assistance	406-444-1788
Maternal & Child Health	406-444-4743
Medicaid	406-444-4540 or 800-362-8312
Mental Health	406-444-3964
Newborn Screening	406-444-6858
Nurse Aide Registry	406-444-4980
Nurse First	406-444-1518
Nursing Home Services	406-444-4209
Nutrition	406-444-5533 or 800-443-4298
Office on Aging	406-444-7788 or 800-332-2272
Oral Health	406-444-0276
PASSPORT to Health	406-444-4148
Prevention Resource Center	406-444-3484
Public Health Laboratory	406-444-2839
Public Information Office	406-444-2596

State Health Insurance Program	406-444-7870
STD/HIV Services	406-444-3565
Telecommunications Access	406-444-1486 or 800-833-8503
Temporary Assistance for Needy Families (TANF)	406-444-1788
Tobacco Use Prevention	406-444-9617
Vital Records	406-444-4228
Vital Statistics	406-444-1756
Vocational Rehabilitation	406-444-2054 or 877-296-1197
Weatherization	406-444-1788
WIC	406-444-5533 or 800-433-4298
Work Readiness Component	406-444-1788

GUIDE TO DEPARTMENT ACRONYMS

AMDD	Addictive & Mental Disorders Division
APS	Adult Protective Services
BRFSS	Behavioral Risk Factor Surveillance System <i>(Annual nationwide survey that is the primary source of state and national information about health-related behaviors)</i>
CACFP	Child & Adult Care Food Program
CFSD	Child & Family Services Division
CHIP	Children's Health Insurance Plan
CI	Centralized Intake <i>(Process for taking reports of child abuse and neglect)</i>
CMS	U.S. Centers for Medicare and Medicaid
CPS	Child Protective Services
CSED	Child Support Enforcement Division
DPHHS	Department of Public Health & Human Services
DSD	Disability Services Division
FICMR	Fetal, Infant & Child Mortality Review
FSD	Fiscal Services Division
HAN	Health Alert Network
HCSD	Human & Community Services Division

HIFA	Health Insurance Flexibility & Accountability <i>(Medicaid waiver designed to encourage states to explore ways to expand private and/or public health-care coverage through creative proposals)</i>
HIPAA	Health Information Portability & Accountability Act <i>(Federal law requiring confidentiality of individuals' health information)</i>
HRD	Health Resources Division
IHS	Indian Health Services
LIEAP	Low Income Energy Assistance Program
MCDC	Montana Chemical Dependency Center
MHNCC	Montana Health Nursing Care Center
MIAMI	Montana's Initiative for the Abatement of Mortality in Infants
MSH	Montana State Hospital
MTAP	Montana Telecommunications Access Program
MTUPP	Montana Tobacco Use Prevention Program
OPCA	Office of Planning, Coordination & Analysis
OTD	Operations & Technology Division
PHSD	Public Health & Safety Division
PRC	Prevention Resource Center <i>(Program aimed at helping Montana communities with comprehensive prevention efforts focusing in areas of substance abuse, child and family safety, violence, and crime)</i>
QAD	Quality Assurance Division
SHIP	State Health Insurance Program

SLTC	Senior & Long Term Care Division
SNS	Strategic National Stockpile <i>(Federal source of vaccines and other critical pharmaceutical supplies in the event of a public health disaster)</i>
SSI	Supplemental Security Income
STD	Sexually Transmitted Disease
TANF	Temporary Assistance for Needy Families <i>(Cash assistance program for low-income families and children)</i>
WIC	Supplemental Nutrition for Women, Infants & Children
WoRC	Work Readiness Component <i>(Program providing employment and training services to individuals receiving TANF assistance)</i>

*For additional copies of this publication, please contact
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of Public Health and Human Services, 406-444-2596
or gshirley@mt.gov*

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